

SCHEDULE UTC

Form 740

42A740-UTC (10-06)

Commonwealth of Kentucky
DEPARTMENT OF REVENUE



For Taxable Year
Ended

___ / ___

**UNEMPLOYMENT TAX CREDIT
KRS 141.065**

For calendar year *or*
for tax year beginning _____, _____, and ending _____, _____ ➤ *Attach to your tax return.* ➤ *See instructions.*

Name of Individual, General Partnership or Corporation		Social Security Number
Street Address or P.O. Box	Apt. Number	Federal Employer ID Number
City	State	ZIP Code

PARTNERS / BENEFICIARIES

Enter name and address of general partnership from Form 765-GP or estate or trust from Form 741.

Enter your share of credit from

- Form 765-GP, Schedule K-1
- Form 741, Schedule K-1

See instructions on reverse before entering this amount on Form 740, Section A, line 4, column A or B. Do not complete the rest of Schedule UTC.

PERSONS EMPLOYED

Enter below the name(s), Social Security number(s) and Office of Employment and Training Certificate number(s) of employee(s) for whom you are claiming a credit. Also enter the date employed and the last date employee was on your payroll during the tax year. (Additional entry lines on reverse.)

	Employee's Name	Social Security Number	Office of Employment and Training Certificate Number	Employment Dates					
				Date Employed			Date Employed Through		
				Mo.	Day	Yr.	Mo.	Day	Yr.
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									

29. (a) Enter number of employees listed above

(b) Enter number of employees listed on reverse of this form

30. Add lines 29(a) and 29(b), enter total

31. Multiply the amount on line 30 by \$100, enter total. This is the total unemployment tax credit

For corporations, enter on Schedule TCS, Part II.

NOTE: For corporations, this amount cannot reduce the income tax liability on Form 720, Form 720S, Form 725 or Form 765, Part III, line 3 below the \$175 minimum.

